

There are a number of interesting pieces of HIPAA information included. Of special interest may be:

- New CalOHI Policy
- New Implementation Guide expected
- CMS information on enforcement of TCS

As always: Please be sure to note that in some cases the information presented may be the opinion of the original author. We need to be sure to view it in the context of our own organizations and environment. You may need additional information, support, legal opinions and/or decision documentation when interpreting the rules.

My thanks to all the folks who have shared information for this e-news.
Have a great day!!!

Ken

Interesting items below:

- CalOHI Policy Memorandum re: HIPAA contracting
- Another Implementation Guide
- [hipaa_gives] Estimating Medicaid HIPAA Compliance Costs
- [hipaanotes] HIPAAnotes - Vol. 2, No. 39 - 10/9/02 - ATTACHMENT
- PRIVACY RULE CONFUSION
- [hipaaalert] HIPAAalert-lite - 10/10/02 - ATTACHMENT
- HIPAA Training In LA Before Halloween - ATTACHMENT
- HANDS-ON-HIPAA: Testing Your Transactions and Code Sets

***** CalOHI Policy Memorandum re: HIPAA contracting *****
>>> "Hart, Therese (OHI)" <THart@ohi.ca.gov> 10/18/02 11:24AM >>>
Attached please find CalOHI's Policy Memorandum 2002-10 which provides procedures on HIPAA contracting for state departments. If you have questions or require additional information, do not hesitate to contact your CalOHI liaison.

<<2002-10-Contracting.doc>>

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KEN's NOTE:

To get to the CalOHI Policies:
go to their main Webpage
<http://www.calohi.ca.gov/state/calohi/ohiHome.jsp>
Click on "California Implementation", and
Click on "Policy/Information Memorandum"

***** Another Implementation Guide *****
>>> <gcox@oshpd.state.ca.us> 10/18/02 02:10PM >>>

Good news about another implementation guide (837 Health Care Services Reporting Guide) for entities like OSHPD who do not collect health care claims.

Announcement arrived Friday 10/18/02:

The Health Care Service: Data Reporting Guide is a work product of ANSI ASC X12N developed by the Reporting Guide work group of the Public Health Data Standards Consortium. The purpose of this X12N implementation guide is to provide a standard for transmission of the ANSI ASC X12 claim content and format (837) for use in reporting institutional encounters to state or federal agencies as defined in their respective laws or regulations. This implementation guide has been developed to be compatible with HIPAA mandated transactions. At the October ANSI ASC X12 meeting in Miami the appropriate groups voted to publish this guide. The publisher, Washington Publishing Company, will finalize and post the guide on their web site (www.wpc-edi.com) later this year.

***** [hipaa_gives] Estimating Medicaid HIPAA Compliance Costs *****
We have a tool used in NC to help determine costs. It's located at
<http://dirm.state.nc.us/hipaa/hipaa2002/amicovered.html>

***** PRIVACY RULE CONFUSION *****
(from the HIPAAAlert lites note)
FROM: <http://www.hipaadvisory.com/news/index.cfm#1008ncvhs>

October 8, 2002 NCVHS Alerts Thompson to Covered Entities' Confusion

The Subcommittee on Privacy and Confidentiality of the National Committee on Vital and Health Statistics (NCVHS) heard from witnesses throughout New England on September 10 and 11, 2002 in Boston as part of its duty monitoring covered entities' HIPAA implementation. Although additional hearings are scheduled in late October and early November in Baltimore and Salt Lake City, the NCVHS was so troubled by the Boston testimony that it sent its initial findings and recommendations to HHS Secretary Tommy Thompson in a letter dated September 27, 2002.

The witnesses at the Boston hearing expressed widespread support for the goals of the Privacy Rule. Some providers, especially larger ones, reported making progress toward compliance. There was also praise for the guidance provided by the Office for Civil Rights (OCR) in July 2001.

Overall, however, the NCVHS was both surprised and disturbed at the low level of implementation and the high levels of confusion and frustration. Some covered entities decided to wait until the final Privacy Rule amendments were published in August 2002, and only now are beginning to think about their compliance duties. Many physicians, dentists, and other health care providers, especially those in small towns and rural areas, have never even heard of HIPAA, do not think it applies to them, or are confused by the various standards. State and local governments reported lacking the budget or personnel to draft their own HIPAA documents and design training programs to comply with the Privacy Rule. NCVHS goes on to state, "The failure of the OCR to make available sample forms, model language, and practical guidance has left covered entities at the mercy of an army

of vendors and consultants, some of whose expertise appears limited to misinformation, baseless guarantees, and scare tactics."

Read the letter.

<http://www.hipaadvisory.com/news/2002/1008ncvhs.htm>

***** HHS RELEASE--HIPAA STANDARDS *****

>>> sdavis@odmhsas.org 10/16/02 04:56PM >>>

fyi

Subject: HHS RELEASE--HIPAA STANDARDS

Date: October 15, 2002

For Release: Immediately

Contact: CMS Press Office

(202) 690-6145

Headline: CMS NAMED TO ENFORCE HIPAA TRANSACTION AND CODE SET STANDARDS HHS

Office for Civil Rights To Continue To Enforce Privacy Standards

HHS Secretary Tommy G. Thompson announced today that the Centers for Medicare & Medicaid Services (CMS) will be responsible for enforcing the transaction and code set standards that are part of the administrative simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

"HIPAA administrative simplification is going to streamline and standardize the electronic filing and processing of health insurance claims, save money and provide better service for providers, insurers and patients," Thompson said.

"To accomplish this will require an enforcement operation that will assure compliance and provide support for those who file and process health care claims and other transactions," Thompson said. "CMS is the agency best able to do this."

CMS will continue to enforce the insurance portability requirements of HIPAA. The HHS Office for Civil Rights (OCR) will enforce the HIPAA privacy standards. CMS and OCR will work together on outreach and enforcement and on issues that touch on the responsibilities of both organizations - such as application of security standards or exception determinations.

Ruben J. King-Shaw Jr., CMS deputy administrator and chief operating officer, said CMS will create a new office to bring together its responsibilities under HIPAA, including enforcement.

"Concentrating these CMS responsibilities in a new office with a single mission will give us the most efficient operation possible, while providing strong support for all our partners in the health care community," King-Shaw said.

The new CMS office will establish and operate enforcement processes and develop regulations related to the HIPAA standards for which CMS is responsible. These standards include transactions and code sets, security, and identifiers for providers, insurers and employers for use in electronic transactions. The office will report directly to the deputy administrator.

The office also will conduct outreach activities to HIPAA covered entities such as health care providers and insurers to make sure they are aware of the requirements and to help them comply.

Federal law requires most health plans, clearing houses, and those providers that conduct certain transactions electronically to be compliant with the HIPAA transactions standards by Oct. 16, 2002, unless they file on or before Oct. 15 for a one-year extension. Those who are not compliant and have not filed for the extension may be subject to statutory penalties. (The law gives certain small health plans until Oct. 16, 2003 to comply).

Enforcement activities will focus on obtaining voluntary compliance through technical assistance. The process will be primarily complaint driven and will consist of progressive steps that will provide opportunities to demonstrate compliance or submit a corrective action plan.

A fact sheet summarizing the administrative simplification standards required by HIPAA is available at <http://www.hhs.gov/news/press/2002pres/hipaa.html>. More detailed information about the standards is available at <http://www.cms.hhs.gov/hipaa>.

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Note: All HHS press releases, fact sheets and other press materials are available at www.hhs.gov/news.

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*** HANDS-ON-HIPAA: Testing Your Transactions and Code Sets *****

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H I P A A n o t e -- Volume 2, Number 40 -- October 17, 2002

>>From Phoenix Health Systems--HIPAA Knowledge--HIPAA Solutions<<
=>Healthcare IT Consulting & Outsourcing<=

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** HANDS-ON-HIPAA: Testing Your Transactions and Code Sets **

60-minute audio conference + slides

** Tuesday, October 29 at 2:00 PM **

For more information or to register now, visit our HIPAAstore at:
<http://www.hipaadvisory.com/ezcart/>

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This week's HIPAAnote...

*** Behind on Your HIPAA Compliance? Here's What to Do ***

So you missed the filing deadline to request an extension for compliance with the transactions regulations. And the privacy deadline is only six months away. Yet, you have not completed a gap analysis nor even begun planning your HIPAA strategy!

You're not alone -

According to the U.S. Healthcare Industry Quarterly HIPAA Survey Results (HIMSS and Phoenix Health Systems, Inc., Summer 2002), 80% of providers and 79% of payers have not completed their Transactions and Code Sets remediation AND Privacy remediation.

What do you do now? The first step should be to consult with your corporate legal staff about the matter. Then, you need to focus on HIPAA compliance.

At this point, the quickest and most effective way to achieve compliance may be through "negative" or non-compliance assumptions. Since there is not enough time to conduct a comprehensive gap analysis, you start from ground zero with your HIPAA strategic plan. Basically, you assume that you meet none of the regulatory standards and go from there. You move forward to implement HIPAA compliant processes throughout the organization, eliminating or altering any practices that are incongruent with your plan.

Whether you choose to engage third party assistance, or manage HIPAA implementation totally in-house, you still should immediately lay down the following groundwork:

1. Designate a privacy official
2. Designate assigned physical security responsibility
3. Form a HIPAA Steering Committee
4. Form Privacy, Security, Education, Business Associates, Transactions and Operations Teams
5. Investigate how many entities will be included.
6. Decide if you will develop and implement your HIPAA strategy as separate entities or as a formal healthcare organization.
7. Make sure your HIPAA Steering Committee, and all others charged with managing the implementation process, have a solid understanding of all appropriate HIPAA regulations.

The last point is critical. You cannot afford to waste time planning organizational changes based on HIPAA mythology - get the facts! The final rules for Privacy, Transactions, Code Sets, and some of the Unique Identifiers have now been

published. Make sure you understand the actual regulations, obtain appropriate legal counsel, and base your HIPAA implementation on the established laws.

The above steps will help you expedite the planning and implementation process.

Angie Atcher, Director
Phoenix Health Systems

That's today's HIPAAnote...now, pass it along!

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Bring your HIPAA questions and ideas to life at... HIPAAlive!

Join over 5,000 other thinkers, planners, learners and lurkers who are already members of our sister email discussion list. We almost make HIPAA fun! Almost. (Also available in a PREMIUM version of easy-to-navigate, individually formatted, "cleaned up" digests.) Now when you join HIPAAlive-Premium, you receive a FREE Doc Site Membership!

Find out more about HIPAAlive, the Doc Site, and HIPAAlive-Premium at:
<http://www.HIPAAadvisory.com/live>

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HIPAAnotes are published weekly as a learning tool to help you and your associates stay tuned-in to HIPAA and its implications. Forward it to anyone with a "need to know" through your own internal mailing list, intranet or newsletter -- whatever works for you...

Our HIPAAcratic oath: We'll use your ideas for HIPAAnotes -- send them!
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